DATENT	A DDI 1/		DETERMINA	TION	DECODO
PAICNI	AFFLIN	er.	I / C I C DIVILIVA	LILIIN	DEWINI

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ective October 1, 2000	DCDSD 2010160

Effective October 1, 2000						ALDGD 00 10 160						
. CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY OTHER TYPE OR SMALL E						
TC	TAL CLAIMS		28					RATE	FEE]	RATE	FEE
FO	R	NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		2 minus 20=		. 8		,	X\$ 9=		OR	X\$18=	ral	
INDEPENDENT CLAIMS		3 minus 3 =		* Ø			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT				+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	RECE		
	CLAIMS AS AMENDED - PART II						OTHER THAN					
 		(Column 1)		(Colu		(Column 3)	, ,	SMALL		OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT	3 · 1 · 1	HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CLAIL	=		X40=		OR	X80=	
┞	FIRST PRESE	NTATION OF M	ULTIPLE DE	CINDEN	LAIM		•	+135=	,	OR	+270=	
	,				•		1	TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE		.	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	<u> </u> *	Minus	***		<u> -</u>		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+135=			+270=		
								+135=		OR	+270≡ TOTAL	
						•		ADDIT. FEE		OR	ADDIT. FEE	
_	hisku minanini sin	(Column 1) CLAIMS			mn 2) IEST	(Column 3)	1 .					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T.O	=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	+135=		1	+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135=		OR	+270= TOTAL	
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE ADDIT. FEE											

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM **PTO-875** (Rev. 8/00)